Table 1. Model of logistic regression analysis of educational, ACE total score and ISMI total score with the severity of motivation for treatment.

Predictor	В	SE	р	Exp (B)	95% confidence interval for EXP(B)
Secondary education	1,120	0,699	0,109	3,065	0,778-12,074
Higher education	1,972	0,775	,011	7,189	1,574-32,834
ISMI total score	-0,435	0,773	0,574	0,647	0,142-2,946
ACEQ total score	0,346	0,147	0,019	1,414	1,060-1,886

After post data analysis (table 2), a cut-off point was established for the ACEQ total score of 4 points, corresponding to an increased chances of high patient's treatment motivation.

 Table 2. Results of the test ROC analysis for ACEQ total score and the severity of motivation for treatment.

Cutpoint	Sensitivity (%)	Specificity (%)	Youden's index	AUC
3	64.71%	53.57%	0.183	0.689
4	50%	75%	0.250	0.689
5	38.24%	85.71%	0.239	0.689

Conclusions: ACEs may likely be a source of posttraumatic growth in adulthood in patients with mental illness specially if their count amounts to 4 or more variants. The role of social and psychological characteristics of patients with mental disorders in the psychology of the treatment process should be considered systemically, rather than discretely.

Disclosure of Interest: None Declared

EPV0881

Exploring participant's experiences in a multifamily therapy group on schizophrenia : a qualitative approach

O. Amiot^{*}, C. Genis, L. Champlon, S. Said and L. Baziret 92100, GH Paul Guiraud, Boulogne Billancourt, France *Corresponding author. doi: 10.1192/j.eurpsy.2024.1491

Introduction: Prevention of relapse in schizophrenia is a major public health issue. A recent network meta-analysis investigating interventions for relapse prevention in schizophrenia found that the efficacity of family psychoeducation and systemic integrated interventions were superior to treatment as usual at 12 months (Bighelli I, Leucht S et al. Lancet Psychiatry 2021). Other studies also found that multi-family therapies (MFT) were superior to treatment as usual and family psychoeducation in preventing relapses at 2 and 4 years (McFarlane WR, Lukens EP et al. Archives of General Psychiatry.1995). Considering this, we developped in our community center an MFT program based on systemic approach and psychoeducation.

Objectives: Investigate the subjective experience of participants of an MFT group focusing on schizophrenia.

Methods: A qualitative study was designed to explore personal experience of participants using the Interpretative Phenomenological Analysis (IPA) method in order to analyse participant's feedback during semi-directive interviews. By using IPA, participants are experts of their experience. Eight participants took part in this study: 4 patients and 4 parents.

Results: Within all participant's feedback around 10 different themes emerged. We identified three major themes which we have described as: "Affiliation to the group", "Framework of Discovery", "Benefits of MFT".

According to "Affiliation to the group", all participants report movements of adhesion or rejection towards the group. This theme has been subdivided into two sub-themes: "Temporality", and "Identification/differentiation". These sub-themes revealed interindividuals' differences.

According to "Framework of discovery", the MFT group has been identified as a secure place allowing self and other's discovery place. This theme has been divided into two sub-themes: "discovering skills" and "improving oneself and relatives' understanding". Participants experience taking a step back and decentering oneself from usual personnal position.

According to "Benefits of MFT", participants report the feeling of belonging to a group, the impact on self-esteem, on mentalization skills, and on the reflexion on family members' experience of the disease.

Conclusions: This study is, to our knowledge, the first qualitative study examining the subjective experience of members who participated in a psychoeducational and systemic MFT group focusing on schizophrenia. It provides insight into the families' experience, both from the patient's and from each family member's perspective. Results highlight that participants seized the MFT group as a learning space at several levels: personal, intra-family and inter-family.

These data could enlighten professionals working with families on the potential apprehensions of participants, their representations of the group and what process MFT could initiate.

Disclosure of Interest: None Declared

EPV0883

Clinical and Psychosocial Impact of Psychoeducational Groups for Psychosis

F. B. F. Leitão*, C. Cunha, J. Loureiro, A. Guedes, M. J. Ribeiro, C. Loureiro, J. Meira, P. Oliveira, J. R. Silva, P. M. Ferreira and A. M. Moreira

Serviço de Saúde Mental e Comunitária do Porto Ocidental, Hospital de Magalhães Lemos, Centro Hospitalar Universitário de Santo António, Porto, Portugal *Corresponding author.

doi: 10.1192/j.eurpsy.2024.1492

Introduction: Individuals with mental health disorders often lack access to appropriate care, including psychosocial rehabilitation programs, which are considered essential for their recovery. In 2019, as part of the intervention by the *Community and Mental*